UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

| Patsy H. McMill | an | Case No.: 1:21-cv-00091-MC | | | |
|----------------------------------|---|--|----------------|----------|--|
| | Plaintiff(s), | | | | |
| v. | | MOTION FOR LEAVE TO APPEAR PRO HAC VICE | | | |
| Genworth Life a | and Annuity Insurance Company | | | | |
| | Defendant(s). | | | | |
| Attorne | ey Lindsay Todd Perkins | requests special | admission p | ro hac | |
| vice to the Bar | of the United States District Cour | t for the District of Oregon | in the abov | e- | |
| captioned case Plaintiff Patsy I | for the purposes of representing t | he following party (or part | ies): | | |
| In supp | port of this application, I certify the | at: 1) I am an active memb | per in good s | tanding | |
| with the Misso | uri State Bar; and 2) that I | have read and am familiar | with the Fe | deral | |
| Rules of Evide | ence, the Federal Rules of Civil an | d Criminal Procedure, the | Local Rules | of this | |
| Court, and this | Court's Statement of Professiona | lism. | | | |
| I under | stand that my admission to the Ba | r of the United States Distr | rict Court for | r the | |
| District of Ore | gon is solely for the purpose of lit | igating in the above matter | and will be | | |
| terminated upo | on the conclusion of the matter. | | | | |
| (1) | PERSONAL DATA: | | | | |
| ` , | Name: Perkins, Lindsay T. | | | | |
| | (Last Name) | (First Name) | (MI) | (Suffix) | |
| | Agency/firm affiliation: Stueve | | | | |
| | Mailing address: 460 Nichols Ro | oad, Suite 200 | | | |
| | City: Kansas City | State:MO | | 64112 | |
| | Phone number: (816) 714-7100 | Fax number: | (816) 714-7 | ′101 | |
| | Business e-mail address: perkins | @stuevesiegel.com | | | |

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| (2) | BAR A | BAR ADMISSION INFORMATION: | | | | | | |
|-------|---|--|--|--|--|--|--|--|
| | (a) State bar admission(s), date(s) of admission, and bar number(s): Missouri / 09-12-2007 / 60004 | | | | | | | |
| | | Kansas / 07/02/2008 / 23528 | | | | | | |
| | (b) | Other federal court admission(s) and date(s) of admission: WD MISSOURI / 19-20-2007 / 60004, D KANSAS / 11-18-2010 / 23528 | | | | | | |
| | | United States Supreme Court 3-1-2021, 4th Cir. Court of Appeals 2-26-2020 | | | | | | |
| (3) | CERT | 9th Cir. Court of Appeals 12-11-2019, 8th Cir. Court of Appeals 7-13-2010 IFICATION OF DISCIPLINARY ACTIONS: | | | | | | |
| | | I am not now, nor have I ever been, subject to any disciplinary action by any state or federal bar association or subject to judicial sanctions. | | | | | | |
| | | I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.) | | | | | | |
| (4) | Pursuar respons require and tha | RTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: suant to LR 83-3, I have professional liability insurance, or financial onsibility equivalent to liability insurance, that meets the insurance tirements of the Oregon State Bar for attorneys practicing in this District, that will apply and remain in force for the duration of the case, including appeal proceedings. | | | | | | |
| (5) | I ackno manage applica | M/ECF REGISTRATION: acknowledge that I will become a registered user of the Court's case anagement and electronic case filing system (CM/ECF) upon approval of this oplication, and I consent to electronic service pursuant to Fed. R. Civ. P. b)(2)(E) and the Local Rules of the District of Oregon. | | | | | | |
| | | Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the 3, and I certify that the above information is true and correct. | | | | | | |
| DATED |): <u>03/15/2</u> | 2022 | | | | | | |
| | | /s/ Lindsay Todd Perkins | | | | | | |
| | | (Signature) | | | | | | |

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REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

| LR 83-3(a)(1) requires applicants for <i>pro hac vice</i> admission to associate with local cou | ınsel, |
|---|--------|
| unless requesting a waiver of the requirement under LR 45-1. | |
| | |

| To request a waiver of the requirement to as following box: | ssociate with loc | al counsel und | ler LR 45-1, | check the |
|--|-------------------|----------------|---------------|-----------|
| I seek admission for the limited purp Court did not issue. Pursuant to LR requirement to associate with local of from local counsel with this applicant | 45-1(b), I reque | st a waiver of | the LR 83-3 | (a)(1) |
| To associate with local counsel, provide the obtain the signature of local counsel. | e following infor | mation about l | local counsel | l, and |
| Name: Sugerman, David F. | | | | |
| (Last Name) | | | (MI) | (Suffix) |
| OSB number: <u>862984</u> | _ | | | |
| Agency/firm affiliation: Sugerman Dahab | | | | |
| Mailing address: 707 SW Washington St., St | te. 600 | | | |
| City: Portland | _State: OR | Zip: | | 97205 |
| Phone number: (503) 228-6474 | Fax number: | (503) 228-2556 | i | |
| Business e-mail address: david@sugermanda | ahab.com | | | |
| CERTIFICATION OF ASSOCIATE LO | CAL COUNSE | EL: | | |
| I certify that I am a member in good standir understand the requirements of LR 83-3, an number 1:21-cv-00091-MC | | | | |
| DATED: 03/15/2022 | | | | |
| | /s/ David F | F. Sugerman | | |
| | (Signature of Lo | ocal Counsel) | | |
| | | | | |

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